

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/39/960.

FILING DATE

20 APR 2007

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/	/				
2	/	/				
3	/	/				
4	/	/				
5	/	/				
6	/	/				
7	/	/				
8	/	/				
9	/	/				
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44	/	/				
45	/	/				
46	/	/				
47	/	/				
48	/	/				
49	/	/				
50	/	/				
TOTAL IND.	16	↓		↓		↓
TOTAL DEP.	41	←		←		←
TOTAL CLAIMS	57					

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51	/	/				
52	/	/				
53	/	/				
54	/	/				
55	/	/				
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95						
96						
97						
98						
99						
100						
TOTAL IND.		↓	2	↓		↓
TOTAL DEP.		←	18	←		←
TOTAL CLAIMS			20			